

DATE 1-25 -07

HB Comm Services

We case for you.

January 25, 2007

Legislative Testimony

Helena

Madam Chairman, Clark & Members of the Committee,

Thank you for allowing me to speak with you.

I am Kris Carlson, RN, MBA owner of A Plus Health Care. We provide personal care services, HCBS/waiver staffing, skilled home health care, hospice, and temporary medical staffing in MT. We have 8 offices, with approximately 600 employees. I am a MT native from Missoula, graduated from Bozeman in Nursing, then Seattle with MBA in Healthcare Administration. My family moved back to MT in 1993, and began providing Medicaid home care services 10 years ago (1997), acknowledging that basic home care services are essential in our MT communities.

I do thank you for all past increases, both modestly to providers and past wage initiatives – \$ going directly to the personal care direct workers. This year, most importantly we must continue our workforce investment. Who will care for you?

I have 5 requests for your consideration:

- 1. **Provider Rate Increase** The budgeted 2.5% is definitely needed this biennium.
  - a. The CPI since 2000, as an indicator of inflation and costs of doing business in MT, has raised 18%. The program rates have increased only an average of 10% over same time. Primary reasons for increased costs 's of services is: skyrocketing workers' compensation costs (200% last year), liability insurance, travel expense, and increased wages. I believe the provider agencies need to remain viable to provide quality services, educate the growing personal care workforce, and keep jobs in rural MT.
  - b. Upon your request, I offer to show our company's financials for the personal care program. Our Medicaid programs are being subsidized by other funding. These programs are not a money making proposition.

Consider: annual cost reporting, so increases can be evaluated and keep pace?

- 2. Increase "Essential" Mileage rate Thank you, for the Oct. 06 increase from 0.13C/mi to 0.22C/mi. (however, still only 1/2 of the state rate).
  - a. In one instance, we had a client that missed her cardiology appointment 90 miles away-3 times in a row, due to lack of willing drivers. She did not refill her meds and was admitted to the hospital, costing Medicaid plenty. Access to care (such as MD appts) has become increasing difficult for clients, due to available transportation. Our staff are asked to drive their vehicles at 0.22 /mi.(1/2 state rate) they simply cannot do it.

Consider: future mileage rates, based on a factor of the federal/state rate?

- 3. Increase Wage Rates As minimum wages have and continue to increase, and unemployment rates have fallen to all time lows all health care staff are harder to attract. We need another \$1.00 for increases.
  - a. These jobs put the 68% FMAP/federal match directly back to our small communities, even outside the boot! These workers are paid less than most housekeepers, yet need specialized training to perform their positions. Providers cannot simply increase billing rates to increase wages. These jobs in all communities are essential for cost control of public spending. More expensive care options are not the choice of most home care clients.

Consider: Agencies are dependent on this legislature as the single entity that can offer billing/pay rates to cover Medicaid services? It would be great to have a bill to set future increases in this program tied to the economy.

4. **Support Professionalism and Benefits** "Healthcare for Healthcare Workers" This is a national trend to keep our workforce healthy, and support insurance for all... our Medicaid programs also need the tools to assist in recruitment, retention and improved professionalism of workforce. These employees who make less than a livable wage, do not have access to healthcare. Their health care issues, can become more expensive when access and prevention is not an option.

Consider: Support of SB 206 - Thanks Sr. Cobb for your efforts.

5. Address Workforce Issues -Make the job attractive – "Better Job, Better Care". SLTCD must consider setting a minimum amount of service time per home visit (60 to 90minutes). In 2003 authorized shifts hours were significantly decreased, in order to contain costs. 15 min. is not effective for providing personal care, requires too much travel, and the shorter the shift, the less attractive for the caregiver, especially considering the time and distance between patients in Montana. Some workers may drive 20min. for a 15min. shift where they make \$2.50. So it might take 2 ½ hours to make \$10 bucks!

Consider: Ways to make this job attractive 24/7, with hourly min. visits, training cost covered, and restoring program to 2003 program standards - to make these jobs possible.

We urge you to please consider 1. provider rate increases, 2. wage initiative, 3. increasing essential mileage reimbursement, 4. healthcare access benefits (SB206), and 5. addressing our workforce issues, in an increasingly competitive global market.

You can reduce acute care hospitalization and nursing home placement, by supporting lower cost, quality homecare services, which not only comes with increases in quality of life, BUT is essential to control Montana's Medicaid spending.

Respectfully Submitted,

Kris Carlson, RN, MBA Owner/Adminstrator

A Plus Health Care, Inc.

Attachments: Individual client and direct care worker written testimony.

Dear Madame Chairman and members of the committee, my name is Gail Meeks and I live in Columbia Falls Montana. Thank you very much for allowing this to be read to you and for listening to my letter being read.

This matter before you to let you know that I support the Senate Bill 206 (SB206). Health insurance incentives for Medicaid healthcare workers. Other proposed bills are designed to help increase wages, increase mileage reimbursement, and increase nursing rates.

There are many problems that need to be looked at and a solution to them. They are:

- 1. When a PCA or a CNA is scheduled to work, a home setting or at a facility and the family and or the facility turns the PCA or CNA away they should still be entitled their travel paid if apical; as well as 2 hours paid for showing up for work.
- 2. The elderly and or the disabled when they are in need, to many times the personal that allows the hours for each person often times they are short changed, as many need to have help having their shoes and support hose put on and taken off, Allowing just one hour, but yet this person has trouble with other things as well, they do not get the help that they really need, and the one hour allowance for putting on the shoes etc this person is one that falls through the cracks and probably is unable to get any kind of help because of the lack of hours. Each person should be entitled 3 hours a day if not more.
- 3. The elderly and or the disabled that are incontinent should be bathed everyday, if it is a full bath or the body washed off, the allowing of bathing 3 times a week is not enough.
- 4. The PCA and or the CNA a lot of time is the only person that the elderly and or the disabled will have contact with. Many times the worker will run into problems and or find that they need to do more for their assigned, like the person cannot prepare food for themselves and the PCA and or the CNA will have to do this, there are also meals on wheels that many shut ins have no idea that they can receive these meals for free, the meals for wheels generally ask for a \$2 donation, but many of the shut ins have very little money so they for go these meals on wheels, when they should have this extra help afforded to them. Most of these people live on less then \$8000 per year. As the cost of living just keeps getting higher and higher.
- 5. Many good PCA and or the CNA providers stop being providers because they cannot make a living doing the personal care that needs to be done that keeps a lot of the ones in need out of the Nursing homes. Keeping the cost down for the state. But they need to make a wage so that they can feed themselves and their families. There are many things that are needed, the Health insurance for them as well as their family. Since the price of gas is high, the increase of mileage reimbursement should also be done. The wage should start at \$10 per hour and for every 3 months the increase of 25 cents per hour raise. As per the cost of living raises per year, in other sectors of employment. If it a dollar or 3 dollars per year per hour.

Thank you Sincerely,

Gail Meeks PO Box 190252 Hungry Horse, MT 59919 249-4532 I writing this letter in regards to my client/mother, Frances Swallow. She lives in Busby Montana and there are not stores in her town, the closest grocery store is located 16 miles away in Lame Deer or 36 miles in Hardin. Because she lives on a limited income, I have been taking her to shop in Billings, where she'll get more things for her money.

Can we claim hours for shopping in Billings.

Sincerely,

Box/234

Busby, Montana 59016



2411 West Main, Ste 2A Bozeman, MT 59718

Phone: (406)586-0022 Fax: (406)586-1186

January 19th, 2007

I am a personal care attendant for A Plus HealthCare in Bozeman. Caring for people in their homes is very hard work. It sometimes involves lifting people, bathing them, cooking meals for them, cleaning floors, vacuuming and cleaning bathrooms. I use my own car to take them shopping and to doctor's appointments because they are unable to drive.

When I finish with one patient, I often drive several miles to my next client and begin doing these same tasks again. Our reimbursement for traveling is only \$.22 a mile. This is to cover gas, car maintenance, and wear on the tires.

I am often asked to take on extra clients because the Agency can't find enough care attendants to meet client's needs otherwise. I think this is because pay is so low at \$8.50 per hour and people can find other jobs in our area that pay more.

I would like to see our mileage rate keep up to what government people are paid for travel, and also our hourly wage increased to match the importance of the job we perform.

Sincerely.

Anke ulalo

To Whom It May Concern:

This letter is in regards to my hours. I have worked for Buckley Pretty on Top for a long time it has been so long I can't remember when I started please accept my apology. I have been taking care of Buckley and making sure that he gets to his doctors appointments and most recently he has been diagnose with cancer, he has to go to chemotherapy at the Billings clinic and when he is done I have to at least be there to make sure that he has gone through the therapy with no complications for the test of the week. Besides the therapy there are other appointments that he needs to follow up on in Billings and once in a great while he will have an appointment with Doctor Rob Byron at the Lodge Grass Health Clinic but more mainly he is seen at the clinic in Billings due to his poor health. These are the reason why I am requesting more hours from your program it will greatly help not only me but also help Buckley.

Thank you for taking the time to read my short letter.

Sincerely,

Dorothy Pretty on Top

Great Falls, MT

Our constations

#### To Whom It May Concern:

I have worked as a PCA for almost four years. During this time, I have had to work two jobs at times. I like the clients I work with and that is why I stay. I enjoy helping others and knowing that I make a difference. I have also worked in a retirement home. That is why I feel it is more important for some of the client's mentally, that they stay in their own homes. Without my husband, I could not make it on my own and would not be able to feed my child. Thank you for listening.

Yours truly, Tani Fowlkes 47 Wagon Lane Great Falls, MT 59404 To whom it may concern-I have worked as a Pla for almost 4 years. During this time I have had to work 2 yests Jobs at times. I like the Clients ! work with and that is why I Stay. I enjoy helping others and knowing that I make a diffunce. I have also worked in a retirement home. That is why I fell it is more important for some of the Cliento Mentaly that in thier own homes. with out my husband I could not make it on my own and would not be able to feed in for listening. Vours Tracky sam foalled

> Tani Fowlhes 47 wagon Lane Greatfalls Mt89404

To Whom It May Concern:

My daughter is a client of A Plus and I am one of your PCAs. I also was doing PCA work when I lived in Washington State.

We really had a hard time getting someone to care for Lila. Most of the good PCAs don't stick around for long because they can go elsewhere and get better wages for what they do. Some of the good ones try to stick it out because they care for their clients, but if they don't have a spouse that is working or they don't have an extra job themselves, they end up having to leave as they can't make ends meet. We need these good and caring PCAs.

Sincerely,

Marita Johnston

## to whom Do May Concern

my the there is a client of At and I am one of you ... IN's, I diese wien dering PCA work when I lived in washington State, we wally had a hard time yetting someone to care for Lilie. Mart of the good PCA'S Sout stick around for long because they can go elsewhere and get better wages for what they do. Some of the good ones try to stick it out become they were In their clients but if they don't have a spouse that is wishing on Ming closel have an extra job diane selves they and up hours to leave in they can't make ends meet. We need these good & caring PCA's. - Sincerely Moreta Johnston

My name is Regina Houston. I'm 50 and have lived in Great Falls, MT for thirty years. I have been a Personal Care Attendant for 20 of the last 22 years. I absolutely love what I do in helping people stay in their homes as long as they can. It is a big responsibility and one that I take pride in. But it has not come without a cost. The cost is the low wages for 22 years straight. Add the low wages to my responsibility for the total well being of a person in need and the scale ends up way out of balance. Why have I kept doing what I have a passion for 22 years with the continual low wages? I love my job AND I have kept hoping one of these years that our state would value more what I do and match that value to better wages. Please let this be the year, 2007, be the year of appreciation not only in words but pocket book too!

Also, one other important point is that I have seen my share of Personal Care Attendants come and go. Many are single or single with children, or widowed. It is extremely difficult on the wages the State has given for the last 22 years. The state has lost some awesome workers that loved their jobs but couldn't sustain a life or a family on such a low budget. For goodness sakes, have some compassion! Do what needs to be done for the better welfare of all concerned.

Thank you for listening and let this be the year of change. Regina Houston 01/18/07

My mame is Regina Houston. In 50 and have lived in It. Falls, MT for 30 years. I have been a Rensonal Care Attendant for 20 of the last 22 years. I absolutely love what I do in helping people stay in their homes as long as they can. It is a big responsibility 4 one that I take pride in. But it has not come with out a cost. The cost is the Low wages for 22 years straight. Add the low wages to my responsibility for the total well being if a person in med & the scale ends up way out of balance. Why him I kept Joing what I have a passion for 22 years with the continual low wages? I love my jeb AND & have kept hoping one of these years that our state would value more what I do + match that value with bitter wages. Please Let this be the year, 2007, be the year of appreciation not only in words but pocket boo too!

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Mank you for listening of let this be the year of Change, Regina Houston 1-18-07

### Joy Schroeder

408 S. 6th Ave. Bozeman, MT 59715 UCFJoy@aol.com

Jan. 19, 2007

I am a quadriplegic and have worked in campus ministry at MSU Bozeman for 27 years. I depend on home care to get me dressed each morning and help me accomplish all I need and want to do each day for my family and career.

Please appropriate a significant salary raise for personal care attendants in home care. Hotel maids receive higher pay for cleaning rooms than my faithful aides receive for my care. This creates a situation with high turnover and low value placed on the work. I am a human being - more significant than hotel rooms. If people are paid a low wage for assisting human beings to go on with their lives at home, the job will not attract the quality of workers necessary for the position.

The view that this state holds for human life is directly related to the money it appropriates for the care given to human life. Please raise the wage.

Sincerely.

Joy Schroeder

Madame Chairman and members of the committee,

My name is Lois Olbekson, I live in Kalispell, MT. I thank you for your time and consideration today.

I would be here today, but my clients condition has worsened, and she needs me to be with her.

PCA, that is my title, but I wear many hots. Covergiver, confidant, housekeeper, taxi, cook, laundress the list goes on. This is a job that requires knowledge, training and experience, as well as compassion, caring and exellence in the field with our clients and ourselves.

We go through hours and hours of training from diligent supervisors when hired, and more hours of training during the year, to ensure that we are doing everything nessacary to take care of our clients.

Isn't it time to consider our jobs as skilled labor, and to give us adequate pay raises, insurance benefits and mileage reimbursments, for the quality services we provide?

People helping people, really are the lucknest people in the world. In order to ensure this proffession works into the future, we need your help. At A Plus Health Care and others, we care for you and those you love and care for. Someday we may be caring for you!

Please do what is right and derserved for us. I would be here today, but I couldn't afford to take the time off anyway.

Again,	thank you for your time and consideration Her befor you today,
in anto Mic	ine better you today.
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	Sois Kay Olbek Son
	Lois Kay Olbekson
	1435 3rd Ave. E, #31
	Kalispell, MT. 59901
	(406) 249-5167
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January 23, 2007

A Plus Health Care Home health Care + Staffing Services 1117 S. Main Kalispell, MT

Re: Senate Bill 206

#### To Whom It May Concern:

I would greatly appreciate my letter being read to Madame Chairman and the members of the committee. I would have liked to have come to Helena and spoken directly to them. I find that because of financial necessity I am unable to miss the day's work in order to make the trip. Thank you for your kind attention to this matter.

#### Madame Chairman and members of the committee:

My name is Cathy Cameron and I live in Kallspell, Montana. I'm an Oriental Medicine practitioner and Personal Care Attendant. I have worked as a PCA for A Plus Health Care since November of 2005 and previously for two other similar agencies.

Those of us who give personal care do so to provide the people we help with a better quality of life, including necessities such as food buying and preparation, bathing, dressing, clean homes and clothing, assistance moving about safely and making it to medical appointments.

These clients are someone's parents, grandparents, brothers, sisters, sons, daughters. We care for them as if they were family. Clients could be, and perhaps one day will be, some members of your families as well. We all feel more at ease if those caring for our family members were well-trained, having had enough rest to be both alert and patient. Even beyond that, we would rather have them placed with caregivers who show them love.

Even the most dedicated and good-hearted caregiver will perform at less than optimum level if he or she has had to work 65 to 70 hours at current PCA pay rate in order to live. Many caregivers are displaced homemakers, left to make their ways alone after death or divorce of a spouse later in life. These middle-aged persons make good caregivers due to the amount of experience and knowledge they have acquired. However, I feel you would agree that a 65-70 hour work week is a physically and emotionally exhausting experience in middle age, when added to the other responsibilities these persons may be carrying alone, including caring for family at home, squeezing out time to eat, cook and do personal laundry, cleaning and errands, plus the added requirement of travel hours to get to those in need.

The result of having to put in so many hours to pay one's bills is a tired, stressed out caregiver whose body breaks down even as he or she is caring for the bodies and emotions of others, struggling to find money for car repairs and maintenance for the dependable vehicles needed to drive clients where they need to go.

PCA's (Personal care attendants), while not heavily medically trained, still have to know a wide range of information, such as helping one who is choking, assisting those whose brain function is reduced by trauma or illnesses such as Alzheimer's, and when to call the home office to report a critical health emergency. They have to know how to cook to personal preference and for special diets. They have to adapt to multiple health problems and personality states and household conditions, to be able to carefully assist with all kinds of ambulatory limitations, and more. If they are not skilled at handling people, they will not remain employed as caregivers.

I personally have had to work as many as three jobs to make my living, due to the lower pay for PCA's. The solution is not for all the PCA's to become CNA's in order to earn more, although many do, as that leads to critical shortages. Both PCA and CNA in-home care provider designations, as well as office-administrative personnel, contribute absolutely irreplaceable services that would otherwise have to be provided in government subsidized institutions, and the need grows more pressing every year.

What is the answer? I can only offer suggestions to lawmakers.

- 1. Clearly, higher pay rate would enable caregivers and administrative personnel to continue to provide this increasingly important service.
- 2. Mileage rates must be increased, not only because of the fluctuating prices of gas, but because of the wear and tear on the vehicle and consequent repairs. As the system is set up now, one gets paid enough to cover gas or travel time, not both. Those of us who travel out of town several times a week end up contributing our gas to the cause. If that out of town client is the only client we see in a day, we get paid for neither gas nor travel time. Even love of the client cannot compensate for such a financial hit over the course of many weeks.
- 3. Agency training is excellent. However, stepping up PCA technical training would make them even more effective and valuable and merit a higher pay rate, as well as increased respect.

I trust you will make good decisions, as I know you make them, not only for others, but for your own family members as well.

Thank you for this opportunity of speaking up in our American legislative process.

Sincerely,

Cathy Cameron, L. Ac., Dipl. of O.M., PCA

Cathy Cameron, L. Ac., Dipl. of O.M., P.C.A.

16 Teton Ave.

Kalispell, Montana 59901

January 23, 2007

Re: House Bill 206

To Whom It May Concern:

I have been a scheduler for the last 2 years. During that time I have seen many personal care attendants come and go. I believe these employees are leaving due to the low hourly wages, mileage reimbursement and no benefits.

Personal care attendants have a very difficult job in the that they are a caregiver, housekeeper, taxi and cook. They must go into someone else's home and help that client become, as independent as possible without making them feel guilty about needing the help. Personal care attendants have a great responsibility and take great pride in the work that they do with their clients.

That is why they should be rewarded with cost of living raises each year and mileage reimbursement that stays current with the state government as gas rates go up and down. Is it fair to the personal care attendant that they only receive .22 per mile while state employee receives at least .36 per mile?

We must remember that they play a very important role in the lives of many families by being a personal care attendant. The state needs to step up and show how much we value our personal care attendant, and nurse by giving them the wage that they deserve.

Thank you,

Brenda Lynch 499 Rhodes Draw

Brenda Lynch

Kalispell, MT 59901

Dear Madam Chairman and Members of the Committee,

I am writing to express my support for SB 206 and, to ask that you give this bill your full consideration. I am employed as the manager of a health care services organization in the flathead valley. I find myself frustrated at our inability to help our clients in the way I know they need to be helped.

A November 18, 2005 article in the Billings Gazette reported (at that time) that the livable wage in Montana was \$9.07 per hour. Today, our Personal Care Attendants are making \$8.50 per hour. This, fully two years later! I'm not quite sure how we expect these hardworking employees to continue providing care for this very needy population group of elderly and disabled community members when they cannot afford to meet their own basic living needs.

A February 2004 report by the Department of Public Health and Human Services reported that fourty-eight percent of the working poor in Montana (and I think we can agree that at \$8.50 per hour, a Personal Care Attendant would qualify as "working poor") are uninsured.

Last week, I talked at length with a client who was expressing her concern about the health of her primary health care provider. Apparently, the health care provider (or, Personal Care Attendant) did not have health insurance because she could not afford to pay the premiums. This Personal Care Attendant continued reporting for work while ill because she simply could not afford to take a day off to recover from her upper respiratory tract infection. The client was particularly concerned because she is struggling with end-stage COPD. Madam Chairman and Members of the Committee, this scenario is not at all uncommon.

I frequently talk with Personal Care Attendants who are wrestling with significant health and financial issues. Many of these workers are actively seeking other, higher paying employment and they will find it. Unfortunately for our clients (elderly and disabled community members), I don't think these workers will find higher wages in this industry.

l understand that the provision of health insurance benefits will not solve all of these issues. However, it will aide providers in the retention of quality employees. At this point, I have clients who are not getting their needs met simply because I am unable to attract and retain Personal Care Attendants.

If it is true that Montana is projected to have the third largest popluation of seniors in the country by the year 2030, then we most certainly will be facing a crisis the likes of which we are totally unprepared to address. It is imperative that we act now, today.

Truth be told, the provision of health insurance won't remedy this situation. A minor increase in mileage reimbursement or a minor wage initiative won't remedy this situation either. The only way we can get ahead of this looming crisis is for us to begin proactive planning. We must be willing to move beyond planning to implementation.

Your thoughtful consideration of this critical bill is important to our care providers, it's important to the agencies they work for but most importantly, it is important for our clients.

We must do the right thing. They are depending on us.

Thank you for your consideration.

Respectfully Submitted,

Michelle Christensen 6 Yellowstone Street Kalispell, MT 59901 (406)-755-5034 Dear Madam Chairman and Members of the Committee:

I am writing in support of Senate Bill No. 206. As a resident of Montana, and an employee of a health care services organization, this bill is not only important to me personally; it makes economic sense for our state.

As an individual currently without health insurance, I know that I make different decisions about my personal health care than I did when I had insurance. I would not choose to go to the doctor (and pay out of pocket) until a health concern became major, probably requiring a hospital visit. At this point, I have allowed my health to deteriorate to a point requiring a more expensive and lengthier recovery, and I have incurred the expenses of a hospital, rather than a physician's office or clinic. Not only will this cost me more money in the long run, it will cost the state more money and resources — and this happens every day with uninsured Montanans.

From another point of view, providing health insurance to personal-care attendants and direct-care employees in the health care field will undoubtedly improve the quality of health care services in the state of Montana. When I moved to Montana and began looking for work, the availability of health insurance was a big factor in my employment decisions. As this state ages, it will be important to provide a large volume of qualified direct care workers. The availability of health insurance will make this a more enticing job opportunity, and will keep qualified personal-care attendants and direct care workers from taking jobs outside the field due to the necessity of benefits.

Please consider passing Senate Bill No. 206. It is practical, economical and potentially life-saving. Help us keep qualified health care providers healthy and working in the state of Montana.

Sincerely,

Ellen Kaminski, MSW Marion, Montana

Ellen Kamuise, MSW

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CarrieMeschke	Kila NJ 52920	4062575127	Come ( Meschke

# We, the undersigned, support Senate Bill 206 (SB206) Henth Insurence for PCA's

Name	Address	Phone	Signature
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